

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.L.P.E. CLASSIFIER			
FORMALITY REVIEW	NK	989	2/29/01
RESPONSE FORMALITY REVIEW	SL	809	4-23-01

# INDEX OF CLAIMS

✓ Rejected N Non-elected  
 o Allowed I Interferance  
 - (Through numerals) Canceled A Appeal  
 + Restricted O Disposed

Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
 staple additional sheet here.

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